

PARTI

NAME(Last)

LOBBYIST

HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

(First)

THIS SPACE FOR OFFICE USE ONLY

06 MAR 17 A11:14

TELEPHONE

W 79

STATE OF HAWAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM (Type or Print Clearly)

(Middle)

Wong	Joseph	H.L.	457-6869
MAILING ADDRESS (Street)			FAX
\$ 41-047 H	himanu St.		
(City)	(State)	(Zip	Code)
Waimanalo	H	• •	6795
EMPLOYING ORGANIZATION (Fill	in only if you are employed by a business.e	entity which has been retained to lobby)	TELEPHONE
	in only if you are employed by a business of Strong	125 rang	671-4344
MAILING ADDRESS (Street)	,		FAX
94-497 UKec	<i>st.</i>		676-1144
(City)	(State)	(Zip	Code)
Waipalm	HI_	96	795
PART II ORGANIZATIOI	N		
NAME OF ORGANIZATION YOU	LOBBY FOR (Do not abbreviate)	=11.10 d	TELEPHONE
IRON Worker	LOBBY FOR (Do not abbreviate)	25	671-4344
MAILING ADDRESS (Street)	í		FAX
94-497 Wee	· H.		
(City)	(State)	(Zip	Code)
Warpahu	壯	Q	6797
NAME OF PERSON RESPONSIBLE	FOR PREPARING ORGANIZATION'S E	EXPENDITURES STATEMENT	TELEPHONE
Franklin Ha	yashida.		671-4344
			FAX
94-497 U)	kee St		
		• •	Code)
Waisahu	41 967	97	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY										
	Agriculture	∑ Edu	cation	X	Human Services	X	Science, Technology & Economic Development			
X	Communications & Public Utilities		vernment Operations & ance	X	Intergovernmental Relation International Affairs	ns, 🏋	Tourism & Recreation			
X	Consumer Protection & Commerce	X Hav	vailan Affairs	X	Labor & Employment	X	Transportation			
	Culture, Arts, Historic Preservation	Hea	lth	X	Planning, Land & Water Use Management	X	Other: (indicate below)			
区	Ecology, Energy Environmental Protection	X Hou	sing	\triangleright	Public Safety & Correction	s				
L										
PART	IV CERTIFICATION	OF LOBE	BYIST							
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete. 3-17-0((Signature of Lobbyist) (Date)										
	/	, , ,								
PART V AUTHORIZATION TO LOBBY										
NAME . TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED										
Franklin Hayashida Assistant Director										
	OF ORGANIZATION (if appli					TELEPHON	NE.			
Ironworkers Stabilization Fund						671-4344				
MAILIN	IG ADDRESS (Street)					FAX				
94-497 UKee St							676-1144			
(City) (State) (Zip Code)										
Waipahn H1 96797										
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.										
Frakti / Hayeshirk 3/17/06										
(Signature of Authorizing Officer or Person Represented) (Date)										